



CITY OF FITCHBURG
MASSACHUSETTS

Department of Health, Housing & Inspectional Services

**Vacant and/or Foreclosing
Property Registration**

This registration is valid for **one year only** from the date received. New or renewed registrations can be mailed or hand-delivered to 166 Boulder Drive along with a \$100 check payable to City of Fitchburg - no cash accepted. (Check all that apply below)

☐ Vacant ☐ Foreclosing/Foreclosed (Occupied) ☐ Foreclosing/Foreclosed (Vacant)

1. Property Information ☐ Residential ☐ Residential/Commercial Mixed use

Property Address: _____ No. of Units _____

Description of
Property: _____

Does the property have insurance: (please check) Yes ☐ No ☐

Property Insurance Company name: _____ Agent Name _____

Property Insurance Policy Number _____ Agent Phone # _____

2. Owner/Agent Information

Property Owner or Foreclosing Institution: _____

Name: _____ Phone No _____

Address (**NO PO BOX**):

City: _____ State: _____ Zip: _____

If owner is not within 20 miles of the property then the owner is required to supply a local contact within 20 miles of the property.

3. Local Property Management Information (**Owners designee to maintain property, must be located within 20 miles of the property**)

Local Individual or Local Property Mgmt. Co.: _____

Contact Name: _____ Phone No _____

Address (**NO PO BOX**):

City: _____ State: _____ Zip: _____

24-Hour Contact Telephone, Cellular Phone, or Pager No.: _____

Email address:
Name _____ Phone No.: _____

FITCHBURG CITY HALL

166 BOULDER DRIVE, FITCHBURG, MA 01420-3125 PHONE: (978) 829-1870 FAX: (978) 829-1962

4. Mortgagee/Lien Holder Information

Name _____ Phone No _____

Address _____

In accordance with the City of Fitchburg's "Vacant and/or Foreclosing Property" Ordinance, by signing below you **(please initial each section)**:

1. I certify that the information provided above is accurate, and agree to notify the Inspectional Services Department of any updates. _____
2. I agree to pay a fee of \$100 at the time of registration/renewal, Agree that this Property Registration is valid for a period not to exceed one year from the date of initial registration, and agree to renew this Property Registration within 30 days of expiration. Once the property is no longer vacant or is sold, you agree to provide proof of sale or written notice, or proof of occupancy, to the Inspectional Services Department. _____
3. I certify that the property has been inspected by the Owner/Agent at the time of the filing of this Property Registration. _____
4. If the property is vacant; I agree to maintain a local individual or local property management company responsible for securing and maintaining the property. **(Note: local means within twenty (20) driving miles of the property, and property is secure according to the regulation.** _____

Date in which property became vacant _____ (If property not vacant write n/a and skip to section B below)

A. Please identify (check) method to keep vacant building secure:

_____ Secure all openings (according to applicable regulations) continuously until such time as building is reoccupied.

_____ Provide (24) hour watchman services continuously until such time as building is reoccupied.

_____ Provide a monitored intruder alarm system at the perimeter of all floor accessible from grade continuously until such time as building is reoccupied.

B. Please Identify if utilities are: _____ on _____ off _____ Red tagged _____ Winterized _____ Other

If you checked utilities are off above please submit a written plan how the building will be maintained as a result of the lack of utilities. Written plans must include water service, fire alarm and/or sprinkler information: Plans will be reviewed by the Building Commissioner, Director of Public Health and the Fire Chief or their designees.

I agree to post and maintain updated name and 24-hour contact phone number of the local individual or local property Management Company responsible for maintenance of property on the front of the property, so it is clearly visible from the street and must clearly post a "No Trespassing Sign" which complies with Building and Zoning Regulations. _____

I agree that the owner, local individual, or local property Management Company shall inspect and maintain the property on a weekly basis for the duration of the vacancy, in accordance with the relevant City of Fitchburg codes. _____

I agree that once registered the property may be periodically inspected City's Building Department and Health Department. _____

I agree that adherence to this ordinance does not relieve the owner of any applicable obligations set forth in the City ordinances or regulations, Covenant Conditions and Restrictions, and/or Home Owners Association rules and regulations. _____

Applicant Signature and Date

Applicant Printed Name and Date

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